-Fınal

return/terminated

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private

▶ Do not enter social security numbers on this form as it may be made public

Open to Public

DLN: 93493314013236 OMB No 1545-0047

Inspection

74,522,949

118,319,427

-43,796,478

Form990(2015)

81.090.858

134,467,479

-53,376,621

E Telephone number

Department of the ▶ Information about Form 990 and its instructions is at <u>www IRS qov/form990</u> Treasury Internal Revenue Service For the 2015 calendar year, or tax year beginning 01-01-2015 and ending 12-31-2015 C Name of organization D Employer identification number B Check if applicable Chamber of Commerce of the USA Address change 53-0045720 Name change Doing business as Initial return

Number and street (or P O box if mail is not delivered to street address) Room/suite

(202) 463-5590 Amended return ity or town, state or province, country, and ZIP or foreign postal code Application pending Washington, DC 200622000 **G** Gross receipts \$ 174,200,920 Name and address of principal officer $\mathbf{H(a)}$ Is this a group return for Stan M Harrell subordinates? 1615 H Street NW Νo 200622000 Washington, DC H(b) Are all subordinates Tax-exempt status included? 501(c)(3) **√** 501(c) (6) **◄** (insert no) 4947(a)(1) or If "No," attach a list (see instructions) Website: ▶ www.uschamber.com Group exemption number 🕨 L Year of formation 1915 M State of legal domicile DC ✓ Corporation Trust **K** Form of organization Part I Summary 1 Briefly describe the organization's mission or most significant activities To advance human progress through an economic, (Please see Schedule O for the continuation)political, and social system based on individual freedom, incentive, opportunity and responsibility Activities & Governance 2 Check this box ▶ ☐ if the organization discontinued its operations or disposed of more than 25% of its net assets $oldsymbol{3}$ Number of voting members of the governing body (Part VI, line 1a) . 120 4 Number of independent voting members of the governing body (Part VI, line 1b) 4 117 5 Total number of individuals employed in calendar year 2015 (Part V, line 2a) 470 5 Total number of volunteers (estimate if necessary) . 6 7a Total unrelated business revenue from Part VIII, column (C), line 12 213,696 7a Net unrelated business taxable income from Form 990-T, line 34 7b **Prior Year Current Year** 8 Contributions and grants (Part VIII, line 1h) . 196,792,567 164,905,490 9 Program service revenue (Part VIII, line 2g) . 2,285,090 2,238,252 6,332 10 Investment income (Part VIII, column (A), lines 3, 4, and 7d) 7,002 11 Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e) 6,921,201 6,969,016 Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12 206.005.860 174,119,090 13 0 Grants and similar amounts paid (Part IX, column (A), lines 1-3) 0 0 14 Benefits paid to or for members (Part IX, column (A), line 4) . Salaries, other compensation, employee benefits (Part IX, column (A), lines 15 92,531,684 94,140,523 5 - 10) 425,000 1,145,763 16a Professional fundraising fees (Part IX, column (A), line 11e) . b Total fundraising expenses (Part IX, column (D), line 25) \triangleright 0 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) . 110,143,512 81,327,577 203,820,959 175,893,100 18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) 2,184,901 19 Revenue less expenses Subtract line 18 from line 12 -1,774,010 Assets or Beginning of Current Year **End of Year**

preparer has any knowledge

Signature Block

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21

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which 2016-11-09

Signature of officer Date Sign Here Stan M Harrell SVP, CFO & CIO Type or print name and title Print/Type preparer's name Jennifer Rhoderick Preparer's signature Jennifer Rhoderick Date Check P00395735 **Paid** self-employed Firm's name ► Ernst and Young US LLP Firm's EIN > 34-6565596 Preparer Firm's address ▶ 111 Monument Circle Ste 4000 Phone no (317) 681-7000 Use Only

Indianapolis, IN 46204 May the IRS discuss this return with the preparer shown above? (see instructions) For Paperwork Reduction Act Notice, see the separate instructions.

Total assets (Part X, line 16) .

Total liabilities (Part X, line 26) .

Net assets or fund balances Subtract line 21 from line 20

Form	990 (2015)				Page 2						
Par	t IIII Stateme	nt of Program Service	Accomplishments								
	Check if So	chedule O contains a response	e or note to any line in this Part	:III							
1	•	he organization's mission									
				y by analyzing national economic the development of American bus							
_	D.d.bb										
2			orogram services during the year	ar which were not listed on	□Yes ☑No						
	the prior Form 990 or 990-EZ?										
3			significant changes in how it o	onducts, any program							
_	5		5		⊤Yes √No						
	If "Yes," describe these changes on Schedule O										
4	expenses Section		janizations are required to repo	hree largest program services, as rt the amount of grants and alloca							
4a	(Code) (Expenses \$	including grants of \$) (Revenue \$)						
	Research and track	issues affecting the business commu	nity and support pro-business legislati	on, regulations, and political activities							
4b	(Code) (Expenses \$	including grants of \$) (Revenue \$)						
	about trade opportu		arketplace Lobby for business trade	agendas and manage programs that edu	cate American companies						
4c	(Code) (Expenses \$	ıncludıng grants of \$) (Revenue \$)						
	Work closely with as momentum	ssociations and state and local chamb	ers of commerce to build awareness	of and involvement in top policy issues a	nd generate grassroots						
	See Additional D	ata									
4d	O ther program s	ervices (Describe in Schedule	· O)								
	(Expenses \$	ıncludın	g grants of \$) (Revenue \$)						
4e	Total program se	ervice expenses >									
					Form 990 (2015						

Part IV Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1		No
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)? 💆	2	Yes	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3	Yes	
	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	Yes	
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		No
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		No
	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 2	8		No
9	Did the organization report an amount in Part X, line 21 for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		No
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Pait V 😏	10		No
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable			
	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a	Yes	
	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		No
	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		No
	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		No
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	Yes	
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	Yes	
	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		No
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	Yes	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Yes	
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV	14b	Yes	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		No
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		No
	ing page and the control of the cont	, –		

17 Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part

Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part

Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If

IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions) 🔰

b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

20a Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H .

Νo

Νo

Νo

Yes

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20a

20b

1	current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23	Υe
a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K If "No," go to line 25a	24a	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b	
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24 c	
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d	

Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," 25a 25b year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ?

25a Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. **b** Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? 26 Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial

contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family 27 member of any of these persons? If "Yes," complete Schedule L, Part III Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions) a A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, 28a

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Νo

Νo

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Nο

Νo

Νo

Yes

Yes

Yes

Yes

Yes

Form 990 (2015)

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38

b A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, 28b c An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was Yes 28c an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV 🛂 Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M . . . 29 Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified 30

Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I .

31 Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? 32

33 Did the organization own 100% of an entity disregarded as separate from the organization under Regulations

33

sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Pait I 😼

Was the organization related to any tax-exempt or taxable entity? If "Yes." complete Schedule R. Pait II. III. or IV.

34

35a 35a Did the organization have a controlled entity within the meaning of section 512(b)(13)?

b If 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled 35b entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2 . . . 🛂

Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related 36

Did the organization conduct more than 5% of its activities through an entity that is not a related organization

and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI 🔧 Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?

Check if Schedule O contains a response or note thany in emitth Part v V V V V		990 (2015) t V Statements Regarding Other IRS Filings and Tax Compliance			Page 5
18 Exter the number recorded in Sex 3 of Form 1.096 Enters - 0—into stapicable 10 0 0 0 0 0 0 0 0	Гаі				
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Note: A contraction have unstable and 2 as greater than 250, you may be required to efficient maturations. 3					
36 De the organization have amnelated bissness gives income of \$1,000 or mire during the year? 3a Yes 5 11 These, has in their a Form 990-T to this year? If Nor to love 3b, provide an explanation in Schedule O 3b Yes 5 12 These, has the did not make the organization have an interest in, or a signature or other authority over a financial account, in a foreign country (such as a bank account, securities account, or other financial accounts in a foreign country (such as a bank account, securities account, or other financial accounts (above 3b) 1 These, tenter the name of the foreign country 10 The See instructions for filing requirements for Financial 14, Report of Foreign Bank and Financial Accounts (above 3b) 1 The See instructions for filing requirements for Financial Theorem 14 Theorem 15 The See instructions for filing requirements for Financial Theorem 15 Theor	b		2b	Yes	
4. A tary time during the calendary year, did the organization have an interest; in, or a signature or other authority year an annual account in a foreign country (such as a bank account, securities account, or other financial account in a foreign country (such as a bank account, securities account, or other financial accounts of the foreign country (such as a bank account, securities account, or other financial accounts (see instructions for fining requirements for Find EN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). 5. Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? 5. No b Did day taxoble party notify the organization file form 1886-77. 5. If Yes, to line 5a or 5b, did the organization file form 8886-77. 6. Oese the organization have annual gross receipts that are normally greater than \$1.00,000, and did the organization solic tam ye contributions that were not tax deductible. 6. Pees before the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? 6. Organization start may receive deductible contributions under section \$70(c). 7. Organization start may receive deductible contributions under section \$70(c). 8. If Yes, did the organization nettly the donor of the value of the goods or services provided? 9. If Yes, did the organization nettly the donor of the value of the goods or services provided? 9. If Yes, did the organization nettly the donor of the value of the goods or services provided? 9. If Yes, did the organization multiply the donor of the value of the goods or services provided? 9. If Yes, did the organization multiply the donor of the value of the goods or services provided? 9. If Yes, did the organization multiply the year, pay premiums, directly or indirectly, on a personal benefit contract? 9. If Yes, did the organization will the year payment of year or indirectly, on a personal benefit contract? 9. If Yes are provided to the	3a		3a	Yes	
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See interference and an other operations of the organization for flicing requirements for FincEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR). 53 Was the organization a party to a prohibited tax shelter transaction at any time duming the tax year? 54 Was the organization a party to a prohibited tax shelter transaction at any time duming the tax year? 55 Was the organization a party to a prohibited tax shelter transaction? 56 If "Yes," to line 5a or 5b, did the organization file Form 8886-17 56 Obes the organization belief tay contributions that were not tax deductible as charitable contributions? 56 If "Yes," to line 3a or 5b, did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 57 Organizations that may receive deductible contributions under section 170(c). 58 If "Yes," and the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 59 If "Yes," and the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible? 50 Organizations that may receive deductible contributions under section 170(c). 50 If the organization receive a symmetry in excess of \$75 made party as a contribution and partly for goods and services provided to the payor? 50 If "Yes," indicate the number of Forms 81282 filed during the year. 51 If "Yes," indicate the number of Forms 81282 filed during the year. 52 If the organization received any funds, directly or indirectly, to pay premiums on a personal benefit contract? 53 If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? 53 If the organization received a contribution of qualified intellectual property, did the organization file form 8899 as required? 54 If the organization make any taxable distribution to a donor, donor advised fund maniformed by the sponsoring organization	4a	over, a financial account in a foreign country (such as a bank account, securities account, or other financial	4a	Yes	
So Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? So No No If "ves," to line So or 5b, did the organization that it was or is a party to a prohibited tax shelter transaction? So No No If "ves," to line So or 5b, did the organization file Form 8886-T? So No If "ves," to line organization solicit any contributions that were not tax deductible as chantable contributions? So Ves If "ves," that the organization include with every solicitation an express statement that such contributions or gifts West If "ves," that the organization include with every solicitation are express statement that such contributions or gifts West If "ves," that the organization include with every solicitation are express statement that such contributions or gifts West If "ves," that the organization include with every solicitation are express statement that such contributions or gifts West If "ves," that the organization include with every solicitation are express statement that such contributions or gifts West If "ves," that the organization receives a payment in excess of \$75 make parry as a contribution and parry for goods and services provided to the payor? The first payment of promise of gifts West If "ves," indicate the number of forms \$8282 filed during the year. Day premiums and parry as a contribution of payment of promise gifts West If "ves," indicate the number of forms \$8282 filed during the year of payment gifts West If "ves," indicate the number of forms \$8282 filed during the year of payment gifts West If "ves," indicate the number of forms \$8282 filed during the year of payment gifts West If "ves," indicate the number of forms \$8282 filed during the year of the payment gifts West If "ves," indicate the number of forms \$8282 filed during the year of the payment gifts West If "ves," indicate the number of forms \$8282 filed during the year of the payment gifts If "ves," indicate the number	b	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts			
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction? If "Yes," to line 3 or 50, did the organization file Form 8886-T? Sc Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as chantable contributions? By 19'es," did the organization include with every solicitation an express statement that such contributions or girts were not tax deductible? Did the organizations that may receive deductible contributions under section 170(c). Did the organization notice are payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? Did the organization notice, exchange, or otherwise dispose of tangible personal property for which it was required to the Payor? If "Yes," indicate the number of forms \$282 filed during the year 7d	52	· · · ·	52		N.o.
to If "Yes," to line 5a or 5b, did the organization file Form 8886-T? 6a Does the organization bave annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible as chanitable contributions? 6b If "Yes," indicate that may receive deductible contributions under section 170(c). a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? 7c Understand that may receive deductible contributions under section 170(c). a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? 7b If "Yes," indicate the number of Forms \$282 filed during the year. 7d If "Yes," indicate the number of Forms \$282 filed during the year. 7d If "Yes," indicate the number of Forms \$282 filed during the year. 7d If "Yes," indicate the number of Forms \$282 filed during the year. 7d If "Yes," indicate the number of Forms \$282 filed during the year. 7d If "Yes," indicate the number of Forms \$282 filed during the year. 7d If "Yes," indicate the number of Forms \$282 filed during the year. 7d If "Yes," indicate the number of Forms \$282 filed during the year. 7d If "Yes," indicate the number of Forms \$282 filed during the year. 7d If "Yes," indicate the number of Forms \$282 filed during the year. 7d If "Yes," indicate the number of Forms \$282 filed during the year. 7d If "Yes," indicate the number of Forms \$282 filed during the year. 7d If "Yes," indicate the number of Forms \$282 filed during the year. 7e Indiator of the organization file form 8899 as required? 7d If "Yes," indicate the number of Forms \$282 filed during the year. 7e If the organization secures a contribution of cars, boats, airplanes, or other vehicles, did the organization file a form 8899 as required? 7d If "Yes," indicate the sponsoring organization make any taxable distributions under section 4966? 8 Sponsoring					
services provided to the payor? 7 Organization that may receive deductible contributions under section 170(c). 8 Diff Yes, 16 de the organization shart way to include with every solicitation an express statement that such contributions or gits were not tax deductible? 8 Diff Yes, 16 de the organization include with every solicitation an express statement that such contributions or gits were not tax deductible? 8 Diff Hes approximation that may receive deductible contributions under section 170(c). 8 Diff Hes approximation that may receive deductible contributions under section 170(c). 9 Diff Yes, 20 de the organization notify the donor of the value of the goods or services provided? 10 Diff Hes approximation that may receive deductible contribution of the value of the goods or services provided? 11 Types, 1 Indicate the number of Forms 8282 filed during the year. 12 Diff Hes approximation received any funds, directly or indirectly, to pay premiums on a personal benefit contract? 13 Diff He organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 14 Diff He organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 15 Diff He organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 16 Diff He organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 17 Diff He organization received a contribution of qualified intellectual property, did the organization file form 8899 as required? 17 Diff He organization intereved a contribution of cars, boats, airplanes, or other vehicles, did the organization flee form 8890 as required? 18 Did the sponsoring organization make any taxable distributions under section 4966? 19 Did the sponsoring organization make a distribution to a donor, denor advisor, or related person? 19 Did the sponsoring organization make a distribution to a donor, denor advisor, or related person? 10 Did Hes sponsorin			5D		
organization solicit any contributions that were not tax deductible as chantable contributions? Were not tax deductible? Organizations that may receive deductible contributions under section 170(c). If Yes, 3' did the organization notify the donor of the value of the goods or services provided to the payor? If Yes, 3' did the organization notify the donor of the value of the goods or services provided? Organizations that may receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? If Yes, 3' did the organization notify the donor of the value of the goods or services provided? Organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? If Yes, 3' indicate the number of Forms 8282 filed during the year If Yes, 3' indicate the number of Forms 8282 filed during the year If the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? 7c If the organization receive any funds, directly or indirectly, on a personal benefit contract? 7f If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? Form 1098-C? Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year? By Did the sponsoring organizations make a distribution to a donor, donor advisor, or related person? By Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? By Did the sponsoring organizations. Enter Initiation fees and capital contributions included on Part VIII, line 12. If Yes, 2' enter the amount of tax-exempt interest received or accrued during the year? If Yes, 2' enter the amount of received from them) If Yes, 3' enter the amount of received from them) If Yes, 3' enter the amount of reserves the organization must report	·	The state of the state of the organization mention to the state of the	5c		
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70 Organizations that may receive deductible contributions under section 170(c). a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor? b If "Yes," did the organization notify the donor of the value of the goods or services provided? C Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282? d If "Yes," indicate the number of Forms 8282 filed during the year. D If the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? To g If the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? To g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as Form 1098-0? To good a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-0? To good a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-0? To good a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-0? To good a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-0? To good a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-0? To good a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-0? To good a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-0? To good a contribution of cars, boats, airplanes, or other vehicles, did the organization make any taxable distributions under section 4966-0? To good a contribution of cars, boats, airplanes, or other vehicles, did the organization make any taxable distri	b		6b	Yes	
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file Form 8.282?	b		7b		
to If "Yes," indicate the number of Forms 8282 filed during the year	c		70		
f Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract? 7	а		70		
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . 71 g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? . 73 h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? . 7h 8 Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year? . 9a 9a Did the sponsoring organization make any taxable distributions under section 4966? . 9a 9b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? . 9b 10 Section 501(c)(7) organizations. Enter 1 Initiation fees and capital contributions included on Part VIII, line 12 . 10a 10b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 11 Section 501(c)(12) organizations. Enter a Gross income from members or shareholders . 11a b Gross income from ther sources (Do not net amounts due or paid to other sources against amounts due or received from them) . 11b 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a 13 Section 501(c)(29) qualified nonprofit health insurance issuers. 12b 14 If "Yes," enter the amount of reserves the organization must report on Schedule 0 13a 15 Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans . 13b 15 Enter the amount of reserves on hand . 13c 15 Enter the amount of reserves on hand . 13c 16 If "Yes," has it filed a Form 720 to report these payments? "No," provide an explanation in Schedule 0 . 14b			70		
g If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required? h If the organization received a contribution of Cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C? 7h Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year? 9a Did the sponsoring organization make any taxable distributions under section 4966? 9a Did the sponsoring organization make a distribution to a donor, donor advisor, or related person? 9b Did the sponsoring organizations. Enter a Initiation fees and capital contributions included on Part VIII, line 12. b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 11 Section 501(c)(12) organizations. Enter a Gross income from members or shareholders b Gross income from ther sources (Do not net amounts due or paid to other sources against amounts due or received from them) 12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041? 12a If "Yes," enter the amount of tax-exempt interest received or accrued during the year 3 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans 13b	f	Did the organization, during the year, nay premiums, directly or indirectly, on a personal benefit contract?			
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Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time during the year?	h	Form 1098-C?	7h		
b Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	8	Did a donor advised fund maintained by the sponsoring organization have excess business holdings at any time	8		
Section 501(c)(7) organizations. Enter a Initiation fees and capital contributions included on Part VIII, line 12	9a	Did the sponsoring organization make any taxable distributions under section 4966?	9a		
a Initiation fees and capital contributions included on Part VIII, line 12 10a b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 11 Section 501(c)(12) organizations. Enter a Gross income from members or shareholders	b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities 11 Section 501(c)(12) organizations. Enter a Gross income from members or shareholders	10	1 1			
facilities 11 Section 501(c)(12) organizations. Enter a Gross income from members or shareholders					
a Gross income from members or shareholders	D				
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)	11	Section 501(c)(12) organizations. Enter			
against amounts due or received from them)	а	Gross income from members or shareholders			
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year 13 Section 501(c)(29) qualified nonprofit health insurance issuers. a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	b	` ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '			
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a Is the organization licensed to issue qualified health plans in more than one state? Note. See the instructions for additional information the organization must report on Schedule O b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	b	1136			
additional information the organization must report on Schedule O Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13	Section 501(c)(29) qualified nonprofit health insurance issuers.			
In which the organization is licensed to issue qualified health plans	а		13 a		
14a Did the organization receive any payments for indoor tanning services during the tax year? 14a No b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O 14b	b	' ' 401			
b If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O 14b	c	Enter the amount of reserves on hand			
					No
Form 990 (2015	b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O		65	122:5

year by the following The governing body? .

Section C. Disclosure

Part

90 (2015)	F
VI Governance, Management, and Disclosure	

10a Did the organization have local chapters, branches, or affiliates? .

For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below.

	Check it Schedule O contains a response of note to any fine in this Fart VI			•			 		•	-
Se	ction A. Governing Body and Management	•								
								Yes		N
1a	Enter the number of voting members of the governing body at the end of the tax year	1a			:	120				
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee									

.

Section B. Policies (This Section B requests information about policies not required by the Internal Revenue Code.)

Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the

b If "Yes," did the organization have written policies and procedures governing the activities of such chapters,

12a Did the organization have a written conflict of interest policy? If "No," go to line 13

b Describe in Schedule O the process, if any, used by the organization to review this Form 990

Did the organization have a written document retention and destruction policy?

a The organization's CEO, Executive Director, or top management official

If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)

interest policy, and financial statements available to the public during the tax year

▶Stan M Harrell 1615 H Street NW Washington, DC 200622000 (202) 463-5590

List the States with which a copy of this Form 990 is required to be filed▶

affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes? 11a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing

Were officers, directors, or trustees, and key employees required to disclose annually interests that could give

c Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe

Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?

16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a

Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you made these available. Check all that apply Own website Another's website Upon request Other (explain in Schedule O)

State the name, address, and telephone number of the person who possesses the organization's books and records

Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of

b If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?

or similar committee, explain in Schedule O Enter the number of voting members included in line 1a, above, who are ındependent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any

1b

Yes Νo

age 6

Did the organization delegate control over management duties customarily performed by or under the direct

supervision of officers, directors or trustees, or key employees to a management company or other person? ... Did the organization make any significant changes to its governing documents since the prior Form 990 was Did the organization become aware during the year of a significant diversion of the organization's assets? Did the organization have members or stockholders? 7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, Did the organization contemporaneously document the meetings held or written actions undertaken during the

7a

Nο Nο Νo Νo Νo

Nο

Νo

Νo

1		
)		
•	Yes	
)	Yes	

10a

10h

11a

12a

12h

12c

13

14

15a

15b

16a

16b

Yes

Yes

Yes

Yes

Yes

Yes

Yes

Yes

Yes

		$\overline{}$
n A. Governing Body and Management		
Check if Schedule O contains a response or note to any line in this Part VI		
describe the circumstances, processes, or changes in Schedule O. See instructions.		
To each tes response to mies 2 timough to below, and for a two response to mies ou, ob, or rob	Deno	,,

Form 990 (2015)

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year

- List all of the organization's **current** officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees, if any See instructions for definition of "key employee"
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, or highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee										
(A) Name and Title	(B) Average hours per week (list any hours	more t	tion i han o n is	one l both ector	oox, an d	heck unless officer stee)		(D) Reportable compensation from the organization (W- 2/1099-MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the
	for related organizations below dotted line)	Individual trustee or director	Institutional Trustwe	Officer	key employee	Highest compensated emptovee	Former			organization and related organizations
See Additional Data Table										
	-									
	1									
	1									
	1									
										Form 990 (2015)
										10mm 220 (2013)

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)

	•	•	•	•	•	•				,
(A) Name and Title	(B) A verage hours per week (list any hours	more t	tion :han (on is	one l both	oox, an	heck unless officer stee)		(D) Reportable compensation from the organization (W-	(E) Reportable compensation from related organizations (W-	(F) Estimated amount of other compensation from the
	for related organizations below dotted line)	individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	2/1099-MISC)	2/1099-MISC)	organization and related organizations
See Additional Data Table										
1b Sub-Total				•						
c Total from continuation she d Total (add lines 1b and 1c)				٠.	٠.			26,841,339	0	344,322

\$100,000 of reportable compensation from the organization ▶ 193

Total number of individuals (including but not limited to those listed above) who received more than

services rendered to the organization? If "Yes," complete Schedule J for such person

Section B. Independent Contractors Complete this table for your five highest compensated independent contractors that received more than \$100,000 of

\$100,000 of compensation from the organization ▶ 76

Boston, MA 02241

compensation from the organization Report compensation for the calendar year ending with or within the organization's tax year

compensation from the organization report compensation for the cale	madification with or within the organizations	tux year
(A) Name and business address	(B) Description of services	(C) Compensation
Integrated Web Strategy LLC	Web based mkting, PR, & Mbrshp svcs	1,756,009
5330 N 12th Street Phoenix, AZ 85014		
Revolution Agency	Advertising services	1,734,327
1020 Princess Street Alexandria, VA 22314		
Something Else Strategies LLC	Advertising services	1,200,000
112 Lantern Ridge Drive Easley, SC 29642		
Hunton & Williams	Strategic consulting	1,177,787
PO Box 405759 Atlanta, GA 303845759		
Lockton Companies LLC	Insurance brokerage services	762,828
PO Box 415840		

Total number of independent contractors (including but not limited to those listed above) who received more than

5

Nο

Form 99	•	· · · · · · · · · · · · · · · · · · ·						Page
Part V	/++-	Statement o						_
		Check if Schedi	ule O contains a res	ponse or note to any li	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
(0	1a	Federated cam	paigns	1a				012 01.
unts	ь	Membership du	es	1b 7,612,658				
Gr.	c	Fundraising eve	ents					
ffs. r A	d	_		1d 67,888				
nj Gi	e	Government grants		 1e				
Contributions, Giffs, Grants and Other Similar Amounts		_				ļ		
utic	f	similar amounts no		1f 157,224,944				
를 등 등	g	Noncash contribution 1a-1f \$	ons included in lines					
Contained	h	Total. Add lines	s 1a-1f		164,905,490			
				Business Code				
Program Service Revenue	2a	Sponsorships/royal	lties	711190	1,149,839	1,124,839		25,00
₹ ₹	ь	Meetings		900099	488,610	488,610		
-3 2	c	Publication sales		511190	362,341	362,341		
₹ ¥	d	Advertising		541800	213,696		213,696	
Ē	e	Accreditation fees		541900	23,766	23,766		
ogra	f	All other progra	am service revenue					
ď	g	Total. Add lines	s 2a-2f		2,238,252			
	3		ome (including divid		6,332			6,33
	4		ar amounts) stment of tax-exempt bo		,			,
	5	Royalties						
			(ı) Real	(II) Personal				
	6a	Gross rents	187,205	81,830				
	b	Less rental expenses	0	81,830				
	c	Rental income	187,205	0				
	d	or (loss) Net rental incoi	L me or (loss)	<u> </u>	187,205			187,20
			(ı) Securities	(II) Other				
	7a	Gross amount from sales of assets other than inventory						
	ь	Less cost or other basis and sales expenses						
	c d	Gain or (loss)	s)					
ænne	8a	Gross income fi events (not incl	rom fundraising					
Other Revenue			reported on line 1c) a				
ott Ott	ь		penses	b				
	C		(loss) from fundraisir	_				
		See Part IV, lin		a				
	l	Less direct ex	penses (loss) from gaming a	b				
	C	Net income of (loss / Irolli gallillig a	► Edivides				
	10a	Gross sales of returns and allo		1				
	ь	Less cost of go	oods sold b					
	С		(loss) from sales of I	1				
	11a	Miscellaneous		Business Code 561000	6,781,811	6,781,811		
	ь	Affiliate admin	спатде	331000	5,7 51,611	5,, 51,511		
	C							
	d	All other revenu	ue					
	e	Total. Add lines			6,781,811			
	12	Total revenue.	See Instructions .			0.707.55	* · · · · ·	a : = :
					174,119,090	8,781,367	213,696	218,53

Part IX Statement of Functional Expenses

ection 501	1(c)(3) and 501(c)(4) organizations must comp	lete all columns. Al	II other organizations must	complete column (A.)

column (A)	piete c	com	nust	ons n	inizati	tner orga	ection 501(c)(3) and 501(c)(4) organizations must complete all columns
 						art IX .	Check if Schedule O contains a response or note to any line in t

	Γ	<u>, </u>		1 45:	
	ot include amounts reported on lines 6b, o, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations and domestic governments See Part IV, line 21				
2	Grants and other assistance to domestic individuals See Part IV, line 22				
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals See Part IV, lines 15 and 16				
4	Benefits paid to or for members				
5	Compensation of current officers, directors, trustees, and key employees	16,660,248			
6	Compensation not included above, to disqualified persons (as defined under section $4958(f)(1)$) and persons described in section $4958(c)(3)(B)$				
7	Other salaries and wages	61,475,505			
8	Pension plan accruals and contributions (include section $401(k)$ and $403(b)$ employer contributions)	11,680,504			
9	Other employee benefits	628			
10	Payroll taxes				
4.4	Food for converse (non-ampleyees)	4,323,638			
11	Fees for services (non-employees)	1 007 745			
a b	Management	1,807,745			
c	Accounting	621,825			
d	Lobbying	9,949,677			
e	Professional fundraising services See Part IV, line 17	425,000			
f	Investment management fees	,			
g	Other (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O)	13,089,838			
12	Advertising and promotion	11,546,206			
13	Office expenses	5,277,104			
14	Information technology	8,250,501			
15	Royalties				
16	Occupancy	6,631,359			
17	Travel	8,594,636			
18	Payments of travel or entertainment expenses for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	6,164,121			
20	Interest	818,140			
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	2,789,403			
23	Insurance				
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)				
а	Contr to other orgs	2,579,913			
b	Bad debt expense	1,233,000			
c	Contr to affiliates	202,000			
d	Taxes	2,845			
е	All other expenses				
25	Total functional expenses. Add lines 1 through 24e	175,893,100			
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here ► ☐ if following SOP 98-2 (ASC 958-720)				

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Net Assets or Fund Balances

01111 330 (2013)						
Part X	Balance She					
	Check if Schedu					

II of Schedule L

II of Schedule L

Cash-non-interest-bearing

Pledges and grants receivable, net .

Accounts receivable, net . .

Notes and loans receivable, net .

Prepaid expenses and deferred charges

Investments—publicly traded securities

Land, buildings, and equipment cost or other basis

Investments—other securities See Part IV, line 11

Investments—program-related See Part IV, line 11

Total assets.Add lines 1 through 15 (must equal line 34)

Escrow or custodial account liability Complete Part IV of Schedule D .

Unsecured notes and loans payable to unrelated third parties . . .

Other liabilities (including federal income tax, payables to related third parties,

key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L

Secured mortgages and notes payable to unrelated third parties

Organizations that follow SFAS 117 (ASC 958), check here ▶

Organizations that do not follow SFAS 117 (ASC 958), check here ▶

Paid-in or capital surplus, or land, building or equipment fund . . .

Retained earnings, endowment, accumulated income, or other funds

Loans and other payables to current and former officers, directors, trustees,

Inventories for sale or use .

Complete Part VI of Schedule D

Less accumulated depreciation .

Intangible assets

Grants payable . . .

Complete Part X of Schedule D

Unrestricted net assets

Deferred revenue .

Other assets See Part IV, line 11 .

Accounts payable and accrued expenses

Tax-exempt bond liabilities

and other liabilities not included on lines 17-24)

Total liabilities. Add lines 17 through 25 . . .

Capital stock or trust principal, or current funds

Total liabilities and net assets/fund balances

lines 27 through 29, and lines 33 and 34.

Temporarily restricted net assets

Permanently restricted net assets

Total net assets or fund balances

complete lines 30 through 34.

Savings and temporary cash investments .

Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part

Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary organizations (see instructions) Complete Part

orm 990 (2	om 990 (2015)							
Part X	Balance Sheet							
	Check if Schedule O contains a response or note to any line in this Part X							
				/ A				

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15,791,384

2,873,413

41,579,177

1,349,594

12 854 487

74,522,949

21,451,177

150,750

4,263,268

92,454,232 118,319,427

-139,304,431

95,507,953

-43,796,478

74,522,949

Form 990 (2015)

74,894

Page	1	:

(B)	

Page	1:
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- End

Beginning of year

22,309,258

2,867,084

39,734,077

31,599

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1,589,742

14,559,098

81,090,858

24,676,986

72.250

8,435,712

101,282,531

134,467,479

-137,259,391

83,882,770

-53,376,621

81,090,858

44 955 723

32,101,236

10a

10b

Donated services and use of facilities .

Part XIII Financial Statements and Reporting

1 Accounting method used to prepare the Form 990

a separate basis, consolidated basis, or both

Single Audit Act and OMB Circular A-133?

Investment expenses

Prior period adjustments

column (B))

Schedule O

Schedule O

Separate basis

Separate basis

basis, consolidated basis, or both

Total revenue (must equal Part VIII, column (A), line 12) . .

Revenue less expenses Subtract line 2 from line 1 .

Total expenses (must equal Part IX, column (A), line 25) . . .

Other changes in net assets or fund balances (explain in Schedule O) .

10 Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,

Check if Schedule O contains a response or note to any line in this Part XII

If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or reviewed on

If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a separate

c If "Yes," to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?

3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the

b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits

If the organization changed either its oversight process or selection process during the tax year, explain in

If the organization changed its method of accounting from a prior year or checked "Other," explain in

2a Were the organization's financial statements compiled or reviewed by an independent accountant?

Consolidated basis

b Were the organization's financial statements audited by an independent accountant?

✓ Consolidated basis

Both consolidated and separate basis

Both consolidated and separate basis

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174,119,090

175,893,100

-1,774,010

-53,376,621

11,354,153

-43,796,478

No

Νo

Νo

Form 990 (2015)

Yes

Yes

Yes

2a

2b

2c

3a

3b

Check if Schedule O contains a response or note to any line in this Part XI

Additional Data

Software ID: Software Version:

> EIN: 53-0045720

Name: Chamber of Commerce of the USA

Form 990, Part III - 4 Program Service Accomplishments (See the Instructions)

) (Revenue \$

(Code) (Expenses \$ including grants of \$

Recruit and retain members and coordinate member relations

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(A) Name and Title	(B) A verage hours per week (list any hours for related	m unles	ore t ss pe	han erso cer	not one n is and			(D) Reportable compensation from the organization (W- 2/1099-	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	MISC)	MISC)	organization and related organizations
Andrew Abboud Director	1 00	×						0	0	
David Adkisson Director	1 00	×						0	0	
Robert O Agbede Director	1 00	×						0	0	
Harry C Alford Director	1 00	×						0	0	1
Anthony J Allott Director	1 00	×						0	0	
Stewart Alvarez Director	1 00	×						0	0	

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Scott Anderson

Lee R Anderson Sr

John W Bachmann

Treasurer/Director

Richard H Bagger

Director

Director

Director

(A) Name and Title	(B) A verage hours per week (list any hours for related	m unles	ore t ss pe	han rso cer	not one n is and			(D) Reportable compensation from the organization (W- 2/1099-	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the
	organizations below dotted line)	individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	MISC)	MISC)	organization and related organizations
Charles E Barnes Sr Director	1 00	×						0	0	
Hector V Barreto Director	1 00	×						0	0	1
Lane Beattie Director	1 00	×						0	0	1
Sandra Beaty Director	1 00	×						0	0	1
Kathy G Beckett Director	1 00	×						0	0	
Thomas D Bell Jr Director	1 00	x						0	0	1

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Gary C Bhojwani

John F Biagas

Phillip D Brady

Michelle H Browdy

Director

Director

Director

Director

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(A) Name and Title	(B) A verage hours per week (list any hours for related	m unles	ore t ss pe	han erso cer	not one n is and			(D) Reportable compensation from the organization (W- 2/1099-	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the
	organizations below dotted line)	individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	MISC)	MISC)	organization and related organizations
Chuck Brymer Director	1 00	×						0	0	1
Kane Calaman Director	1 00	×						0	0	1
John Cannon Director	1 00	×						0	0	1
Red Cavaney Director	1 00	×						0	0	
Norman C Chambers Director	1 00	×						0	0	1
James W Cicconi Director	1 00	x						0	0	1
	4.00									

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Ken W Cole

Kevin M Connelly

Charles Copeland

Director

Director

Director

Director

Adam Cooper

(A) Name and Title	(B) A verage hours per week (list any hours for related	m unles	ore t ss pe	han erso cer	not one n is and			(D) Reportable compensation from the organization (W- 2/1099-	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the
	organizations below dotted line)	individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	MISC)	MISC)	organization and related organizations
Joseph W Craft III Reg Vice Chair Southcentral/Director	1 00	×		x				0	0	
Ralph de la Torre Director	1 00	×						0	0	1
Nicholas J DeIuliis Reg Vice Chair Great Lakes/Director	1 00	×		×				0	0	1
Wayne S DeVeydt Director	1 00	×						0	0	1
Maura W Donahue Director	1 00	×						0	0	
Thomas J Donohue Pres & CEO/Director	1 00	×		×				6,591,126	0	-11,43
Michael L Ducker	1 00	x		х				0	0	

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Chairman/Director

Carne E Dwyer

Fuad El-Hibri

Patricia Elizondo

Director

Director

Director

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(A) Name and Title	(B) Average hours per week (list any hours for related	m unle:	ore t ss pe	han erso cer	not one n is and			(D) Reportable compensation from the organization (W- 2/1099-	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	MISC)	MISC)	organization and related organizations
David R Emery Director	1 00	×						0	0	
Daniel F Evans Jr Director	1 00	х						0	0	
Robert D Fatovic Director	1 00	x						0	0	
Patrick M Finken Director	1 00	x						0	0	
Mark D French Director	1 00	x						0	0	
Lance M Fntz Director	1 00	х						0	0	
Craig L Fuller	1 00	.,								

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Director

Director

Director

Director

HP Goldfield

Michael J Graff

Bruce A Gates

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(A) Name and Title	(B) A verage hours per week (list any hours for related	m unles	ore t ss pe	han erso cer	not one n is and			(D) Reportable compensation from the organization (W- 2/1099-	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the
	organizations below dotted line)	individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former	MISC)	MISC)	organization and related organizations
Ernest Green Jr Director	1 00	×						0	0	
James M Guyette Director	1 00	×						0	0	
Bradley M Halverson Director	1 00	×						0	0	
James L Hebe Director	1 00	×						0	0	
James A Hixon Director	1 00	×						0	0	
Scott L Holman Sr Director	1 00	x						0	0	
John L Hopkins	1 00									

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Vice Chairman/Director

Reg Vice Chair East/Director

CA Howlett

Gregory Irace

David Jacobson

Director

Director

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(A) Name and Title	(B) A verage hours per week (list any hours for related	m unle:	ore t ss pe	han erso cer	not one n is and			(D) Reportable compensation from the organization (W- 2/1099-	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the
	organizations below dotted line)	individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	MISC)	MISC)	organization and related organizations
Jan Jones Blackhurst Director	1 00	x						0	0	
Boland T Jones Director	1 00	х						0	0	
Paul W Jones Director	1 00	x						0	0	
Fred Kaiser Director	1 00	x						0	0	
Charles J Kalil Director	1 00	x						0	0	
Frederick Kempe Director	1 00	х						0	0	
Philip D Kennedy	1 00							_	_	

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Director

Director

Director

Director

Raymond F Kerins Jr

Paul J Klaassen

Jessie J Knight Jr

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compensated Employees, and Inde	pendent co.	illia		•				I.	1	1
(A) Name and Title	(B) Average hours per week (list any hours for related	unles	nore ti	than ersoi icer i	o not n one on is and		,	(D) Reportable compensation from the organization (W- 2/1099-	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	MISC)	MISC)	organization and related organizations
Laura Lane Director	1 00	x						0	0	
Elaine R Leavenworth Director	1 00	x						0	0	_
Greg Lebedev Director/Consultant	29 00 3 00	x						240,000	0	-10,00
Hank Linginfelter Director	1 00	x						0	0	_
William G Little Director	1 00	x						0	0	
Christopher B Lofgren PhD	1 00	х						0	0	

1 00

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Director

Director

Director

Director

Ted Mathas

Tamara L Lundgren

Andrew D Lundquist

Richard H McClure

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Chairman Exec Comm/Director

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(A) Name and Title	(B) A verage hours per week (list any hours for related	m unles	ore t ss pe	han erso cer	not one n is and			(D) Reportable compensation from the organization (W- 2/1099-	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the
	organizations below dotted line)	individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	MISC)	MISC)	organization and related organizations
Thomas V McKernan Director	1 00	×						0	0	
Richard L McNeel Director	1 00	×						0	0	
James W Mendenhall Director	1 00	×						0	0	
Randy Milch Director	1 00	×						0	0	
Rance C Miles Reg Vice Chair Southwest/Director	1 00	×		×				0	0	
Darlene M Miller Director	1 00	×						0	0	
Robert S Milligan	1 00									

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Reg Vice Chr Mdwst/Dir

Dayton H Molendorp

David Muhlendorf

Susan K Neely

Director

Director

Director

compensated Employees, and Inde	pendent co			_				l .	ı	1
(A) Name and Title	(B) A verage hours per week (list any hours for related	m unle:	ore t ss pe	han erso cer	not one n is and			(D) Reportable compensation from the organization (W- 2/1099-	from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	MISC)	MISC)	organization and related organizations
C Howard Nye Director	1 00	x						0	0	
Brian O'Hara Director	1 00	×						0	0	
Karen M Olson Beenken Director	1 00	×						0	0	
Mark S Ordan Director	1 00	×						0	0	
Daniel F Packer Director	1 00	x						0	0	
Manuel J Perez de la Mesa Director	1 00	х						0	0	
Wolfgang G Pordzık	1 00	,,								

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Director

Director

Director

Director

James M Power

Randal K Quarles

Jeffrey K Rageth

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(A) Name and Title	(B) Average hours per week (list any hours for related	m unle:	ore t ss pe	han erso cer	not one n is and			(D) Reportable compensation from the organization (W- 2/1099-	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	MISC)	MISC)	organization and related organizations
C Clayton Reasor Director	1 00	х						0	0	
Martın H Richenhagen Director	1 00	х						0	0	
Joseph M Rigby Director	1 00	x						0	0	
Tchad Robinson Director	1 00	x						0	0	
Stephen J Rohleder Director	1 00	х						0	0	
Matthew K Rose Director	1 00	х						0	0	
John Ruan III	1 00									

1 00

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Director

Director

Director

Director

Kım T Rumph

Edward B Rust Jr

Tracy G Schmidt

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Compensated Employees, and Inde	pendent Co	ntra	ctor	S				1	•	
(A) Name and Tıtle	(B) A verage hours per week (list any hours for related organizations below dotted line)	unle:	ore t ss pe offi direct	han erso cer	not one n is and trus	tee)		(D) Reportable compensation from the organization (W- 2/1099- MISC)	(E) Reportable compensation from related organizations (W- 2/1099- MISC)	(F) Estimated amount of other compensation from the organization and related organizations
	dotted lille)	Individual trustee or director	Institutional Trustee	<u> </u>	key employee	Highest compensated employee	ই			or game actions
David T Seaton Director	1 00	×						0	0	1
Gerald L Shaheen Reg Vice Chr West/Dir	1 00	x		x				0	0	1
Donald J Shepard Director	1 00	×						0	0	1
Enc Silagy Director	1 00	×						0	0	1
Rajendra Singh Director	1 00	×						0	0	
Suzanne Sitherwood	1 00	х						0	0	

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Director

Director

Director

Director

Director

Christel Slaughter PhD

Edgar L Smith Jr

Paul S Speranza Jr

James A Squires

compensated Employees, and Ende	penaent co.			_				i	ı	ı	
(A) Name and Title	(B) A verage hours per week (list any hours for related	m unle:	ore t ss pe	han erso cer	not one n is and			(D) Reportable compensation from the organization (W- 2/1099-	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the organization	
	organizations below dotted line)	Individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former	MISC)	MISC)	and related organizations	
Charles R Stamp Jr Director	1 00	x						0	0	1	
James E Stephenson Director	1 00	×						0	0	1	
Cynthia Stinger Director	1 00	x						0	0	1	
Richard K Studley Director	1 00	x						0	0	1	
Frank C Sullivan Director	1 00	x						0	0		
Brandon W Sweitzer Director	1 00	х						0	0		
Richard J Tobin	1 00							_	_		

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1 00

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Director

Director

Director

Director

Mick Truitt

Harold Turner Jr

Joseph B Ucuzoglu

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(A) Name and Title	(B) A verage hours per week (list any hours for related	unles	ore tl	han ersoi icer	o not n one on is and	,	(D) Reportable compensation from the organization (W- 2/1099-	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the
	organizations below dotted line)	Former lighest compensated amployee More Wey employee Officer Institutional Trustee Individual trustee or director		MISC)	MISC)	organization and related organizations			
Steve Van Andel Director	1 00	x					0	0	
Frank L VanderSloot Reg Vice Chr Nrwest/Dir	1 00	x		х			0	0	
LeRoy Walker Jr Director	1 00	x					0	0	
Edward Wanandı Dırector	1 00	x					0	0	1
Mark E Watson III Director	1 00	x					0	0	
Robert C Weber Director	1 00	x					0	0	

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Thomas J Wilson

Christopher C Womack

James M Wordsworth

Joan Woodward

Reg Vice Chair Southeast/Director

Director

Director

Director

EVP, Govt Affairs

Agnes Warfield-Blanc

SVP, Dev and Fund

EVP, USCC, President, CATI

SVP, Comm & Strategy, Cnsl to Pres

David C Chavern

Suzanne P Clark

Thomas J Collamore

EVP, USCC

(A) Name and Title	(B) A verage hours per week (list any hours for related	unles	ore t ss pe	than erso icer	not one n is and			(D) Reportable compensation from the organization (W- 2/1099- MISC)	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the	
	organizations below dotted line)	individual trustee or director	Institutional Trustee	Officer	key employee	Highest compensated employee	Former		MISC)	organization and related organizations	
Elanna S Yalow Director	1 00	x						0	0		
Lily Fu Claffee SVP, Gnl Cnsl/CLO & Secry	20 00			х				1,363,046	0	47,91	
Stan M Harrell SVP, CFO & CIO	40 00			х				876,910	0	57,86	
Myron Brilliant EVP, USCC, EVP & Head of Int'l	40 00 1 00				×			1,997,381	0	39,11	
Shannon D DiBari EVP, USCC, COO	40 00				×			1,423,452	0	-28,69	
Robert B Josten	40 00				х			2,258,599	0	36,83	

40 00

40 00

30 00

10 00 40 00

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53,71

-9,08

40,00

56,87

0

0

0

0

3,990,923

2,017,093

1,063,654

1,400,044

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Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest **Compensated Employees, and Independent Contractors** (A) (R)

SVP Pres & CEO, CCMC & GIPC

Current emp, also frmr key emp

Robert J Enastrom

(A) Name and Title	(B) Average hours per week (list any hours for related	(C) Position (do not check more than one box, unless person is both an officer and a director/trustee)						(D) Reportable compensation from the organization (W- 2/1099-	(E) Reportable compensation from related organizations (W- 2/1099-	(F) Estimated amount of other compensation from the
	organizations below dotted line)	Individual trustee or director	Institutional Trustee		Key employee	Highest compensated employee	Former	MISC)	MISC)	organization and related organizations
Karen A Harbert SVP, Pres & CEO, Energy Inst	40 00					×		1,194,236	0	50,88
David T Hirschmann	40 00					×		1,599,467	0	8,27

40 00

Х

825,408

12,06

SCHEDULE C

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527 ▶Complete if the organization is described below. ▶Attach to Form 990 or Form 990-EZ. ▶Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

Open to Public

OMB No 1545-0047

DLN: 93493314013236

Employer identification number

53-0045720

(d) A mount paid from

filing organization's

funds If none, enter -0-

Inspection

4,003,461

☐ No

3,970,611

4,003,461

32,850

☐ Yes

☐ Yes

√ Yes

(e) A mount of political

contributions received

and promptly and directly delivered to a separate political

Treasury Internal Revenue Service If the organization answered "Yes" on Form 990, Part IV, Line 3, or Form 990-区, Part V, line 46 (Political Campaign Activities), then

Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C

organization made payments. For each organization listed, enter the amount paid from the filing organization's funds. Also enter the amount of political contributions received that were promptly and directly delivered to a separate political organization, such as a separate segregated fund or a political action committee (PAC) If additional space is needed, provide information in Part IV

(c) EIN

(b) Address

- Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B
- Section 527 organizations Complete Part I-A only

If the organization answered "Yes" on Form 990, Part IV, Line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A
- If the organization answered "Yes" on Form 990, Part IV, Line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then

Section 501(c)(4), (5), or (6) organizations Complete Part III

Name of the organization

Chamber of Commerce of the USA

Complete if the organization is exempt under section 501(c) or is a section 527 organization.

Provide a description of the organization's direct and indirect political campaign activities in Part IV

2 Political expenditures

Volunteer hours

(Form 990 or

Department of the

990-EZ)

Complete if the organization is exempt under section 501(c)(3).

Enter the amount of any excise tax incurred by the organization under section 4955

2 Enter the amount of any excise tax incurred by organization managers under section 4955 3

If the organization incurred a section 4955 tax, did it file Form 4720 for this year? Was a correction made?

If "Yes," describe in Part IV

Complete if the organization is exempt under section 501(c), except section 501(c)(3).

1 Enter the amount directly expended by the filing organization for section 527 exempt function activities

Enter the amount of the filing organization's funds contributed to other organizations for section 527 2

exempt function activities

3 Total exempt function expenditures Add lines 1 and 2 Enter here and on Form 1120-POL, line 17b

4 Did the filing organization file Form 1120-POL for this year?

(a) Name

Enter the names, addresses and employer identification number (EIN) of all section 527 political organizations to which the filing

-	(1
	`	

				organization If none, enter -0-
(1) Republican Attorneys General Association	1747 Pennsylvania Ave NW Suite 800 Washington, DC 20006	46-4501717	15,000	
(2) Republican State Leadership Committee	1201 F ST NW Washington, DC 20004	05-0532524	15,000	
or Paperwork Reduction Act Notice, see t	he instructions for Form 990 or 9	90-EZ.	Cat No 50084S Schedule C	(Form 990 or 990-EZ) 2015

group totals

Check 🕨 🗔 If the filing organization belongs to an affiliated group (and list in Part IV each affiliated group member's name, address, EIN, expenses, and share of excess lobbying expenditures) Check ▶ ☐ If the filing organization checked box A and "limited control" provisions apply (b) Affiliated

(a) Filing Limits on Lobbying Expenditures organization's (The term "expenditures" means amounts paid or incurred.) totals Total lobbying expenditures to influence public opinion (grass roots 1a lobbvina) Total lobbying expenditures to influence a legislative body (direct lobbying) Total lobbying expenditures (add lines 1a and 1b)

Other exempt purpose expenditures

under section 501(h)).

Total exempt purpose expenditures (add lines 1c and 1d)

Lobbying nontaxable amount Enter the amount from the following table in both columns

Grassroots nontaxable amount (enter 25% of line 1f)

Subtract line 1g from line 1a If zero or less, enter -0-Subtract line 1f from line 1c If zero or less, enter -0-

Calendar year (or fiscal year

beginning in)

If the amount on line 1e, column (a) or (b) is:

Not over \$500,000

Over \$17,000,000

g

Over \$500,000 but not over \$1,000,000

Over \$1,000,000 but not over \$1,500,000

Over \$1,500,000 but not over \$17,000,000

reporting section 4911 tax for this year?

Lobbying nontaxable amount

Grassroots nontaxable amount

Grassroots lobbying expenditures

Grassroots ceiling amount (150% of line 2d, column (e))

\$1,000,000

If there is an amount other than zero on either line 1h or line 1i, did the organization file Form 4720

\$100,000 plus 15% of the excess over \$500,000

\$175,000 plus 10% of the excess over \$1,000,000

\$225,000 plus 5% of the excess over \$1,500,000

4-Year Averaging Period Under section 501(h) (Some organizations that made a section 501(h) election do not have to complete all of the five columns below. See the separate instructions for lines 2a through 2f.) **Lobbying Expenditures During 4-Year Averaging Period**

(b)2013

(a)2012

The lobbying nontaxable amount is: 20% of the amount on line 1e

Yes

(c)2014

☐ No

(d)2015

Schedule C (Form 990 or 990-EZ) 2015

(e) Total

b	Lobbying ceiling amount (150% of line 2a, column(e))
c	Total lobbying expenditures

2a

	illed Form 5766 (election under Section 501(ii)).		
For e	each "Yes" response on lines 1a through 1i below, provide in Part IV a detailed description of the lobbying		[
		_ Yes	ı
1	During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of		
а	Volunteers?		1

No

(b)

A mount

Yes

165,078,055

62,537,133

-84,497,736

-21,960,603

67.992.305

-89,952,908

1

2

1

2a

2h

2c

3

4 5 No

Νo

Νo

b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?

Media advertisements?

d Mailings to members, legislators, or the public?

e Publications, or published or broadcast statements?

Grants to other organizations for lobbying purposes?

Direct contact with legislators, their staffs, government officials, or a legislative body? Other activities?

Total Add lines 1c through 1i

Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?

Did the activities in line 1 cause the organization to be not described in section 501(c)(3)? **b** If "Yes," enter the amount of any tax incurred under section 4912 If "Yes," enter the amount of any tax incurred by organization managers under section 4912 d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?

Part III-A Complete if the organization is exempt under section 501(c)(4), section 501(c)(5), or section 501(c)(6).

П	\mathbf{t} III-B. Complete if the organization is exempt under section 501(c)(4), se
	Did the organization agree to carry over lobbying and political expenditures from the prior year?
	Did the organization make only in-house lobbying expenditures of \$2,000 or less?
	Were substantially all (90% or more) dues received nondeductible by members?

he organization is exempt under section 501(c)(4), section 501(c)(5), or section

sımılar missions

3 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No" OR (b) Part III-A,

line 3, is answered "Yes." 1 Dues, assessments and similar amounts from members

2 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).

Current year h Carryover from last year Total c

Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues 3

1

2

If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?

Taxable amount of lobbying and political expenditures (see instructions) Part IV

Provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated group list), Part II-A, lines 1 and

Return Reference

Part I-A and Part I-C

2 (see instructions), and Part II-B, line 1 Also, complete this part for any additional information

Supplemental Information

Explanation

The Chamber engaged in public education activities in support of its mission, which includes advancing the interests and concerns of business, economic growth, and the free enterprise system In pursuit of these goals, the Chamber spends funds directly, or works with other organizations with

SCHEDULE D

(Form 990)

Supplemental Financial Statements

► Complete if the organization answered "Yes," on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

Attach to Form 990.

DLN: 93493314013236 OMB No 1545-0047

eas	sury nal Revenue Service	Information about Schedule D (Form 990) and its instruct	ions is at <u>www.irs</u>	.gov/f	orm990.	Inspect	
Na	me of the organi	zation			Empl	oyer identif	ication numbe	r
CH	amber of Commerce	of the OSA			53-0	045720		
Pa		izations Maintaining Donor ete if the organization answere			inds o	r Accoun	its.	
	<u>'</u>		(a) Donor advised funds	,	(b)	unds and o	ther accounts	
L	Total numbe	r at end of year	, ,					
2	Aggregate v year)	alue of contributions to (during						
3	Aggregate v	alue of grants from (during year)						
1	Aggregate v	alue at end of year						
5	_	ation inform all donors and donor a rganization's property, subject to t	-		or advis	ed	☐ Yes	☐ No
5	used only for c	ation inform all grantees, donors, a haritable purposes and not for the l ermissible private benefit?				purpose	☐ Yes	∏ No
Pa	rt III Conse	rvation Easements. Comple	te if the organization a	nswered "Yes" o	n Form	n 990, Part	t IV, line 7.	
L	Purpose(s) of o	conservation easements held by th	e organization (check all th	nat apply)				
	•	on of land for public use (e g , recre	eation or	Dragonustion of an	. b.atav	a allu umma et	tant land area	
	education)	of natural habitat	 	Preservation of an				
	•	on of open space	ı	r reservation of a	cereme	a mistoric sc	ructure	
2	•	2a through 2d if the organization I	neld a qualified conservation	on contribution in th	ne form	of a conser	vation	
_		ne last day of the tax year	icia a quamica conscivant				the End of the	Vear
а	Total number o	of conservation easements			2a	neid de t	the End of the	. i cui
b	Total acreage i	restricted by conservation easeme	nts		2b			
c	Number of cons	servation easements on a certified	historic structure included	dın (a)	2 c			
d		servation easements included in (c ure listed in the National Register) acquired after 8/17/06, a	and not on a	2d			
3	Number of cons	servation easements modified, trar	sferred, released, extingui	shed, or terminate	d by the	e organizatio	on during the	
	tax year ▶							
1	Number of stat	es where property subject to conse	ervation easement is locat	ed ▶	_			
5	_	nization have a written policy regard enforcement of the conservation e		g, inspection, hand	ling of	Г	Yes No	D
5	Staff and volun year	teer hours devoted to monitoring, i	nspecting, handling of viol	ations, and enforci	ng cons	ervation ea	sements durir	ig the
	>	<u></u>						
7	A mount of expe	enses incurred in monitoring, inspe	cting, handling of violation	s, and enforcing co	nserva	tion easeme	ents during the	e year
3		servation easement reported on lir ion 170(h)(4)(B)(II)?	ne 2(d) above satisfy the re	equirements of sect	tion 17	• • • –	Yes No	o o
9	balance sheet,	escribe how the organization report and include, if applicable, the text n's accounting for conservation ea	of the footnote to the orga				•	
aı	t IIII Organ	izations Maintaining Collect ete if the organization answere	tions of Art, Historic	al Treasures, o	or Oth	er Simila	r Assets.	
La		tion elected, as permitted under SF		<u> </u>	ue stat	ement and b	palance sheet	
La	works of art, hi	storical treasures, or other similar e, in Part XIII, the text of the footr	assets held for public exhi	bition, education, o	or resea	rch in furthe		
b	works of art, hi	tion elected, as permitted under SF storical treasures, or other similar e the following amounts relating to	assets held for public exhi					ıc
((i) _{Revenue inclu}	ıded on Form 990, Part VIII, line 1			▶ \$			
(ii) Assets include	ed in Form 990, Part X						
2	If the organizat	tion received or held works of art, h nts required to be reported under S		ersımılar assets fo				

Revenue included on Form 990, Part VIII, line 1

Assets included in Form 990, Part X

Cat No 52283D

	aule D	(Form 990) 2015 Organizations Maintaining	Collections of	∆rt Hic	toric	al T	reasi	Ires or	Other Si	milar ^	ccate	Page 2
CIL	****	(continued)		A1 (, 1113		,aı ı	reast		other 3h	illiai A		
3		g the organization's acquisition, accection items (check all that apply)	ession, and other re	cords, ch	ieck ai	ny of	the foll	owing that	are a sıgn	ıfıcant us	e of its	
а	Γ	Public exhibition		d		Loar	norex	hange pro	grams			
b	_ :	Scholarly research		е		Othe	er					
c		Preservation for future generations										
4	Provide Part >	de a description of the organization's XIII	s collections and ex	plain hov	v they	furth	er the o	organizatio	n's exempt	t purpose	ın	
5		g the year, did the organization solid ts to be sold to raise funds rather tha			,					┌ Yes	5	0
Par	t IV	Escrow and Custodial Arra Complete if the organization a Part X, line 21.	ngements.	<u> </u>								
1a		e organization an agent, trustee, cus ded on Form 990, Part X?	todian or other inte	rmediary	for co	ntribi	utions	or other as	sets not	☐ Yes	5 N	0
b	If"	"Yes," explain the arrangement in Pa	art XIII and comple	te the fol	lowing	table	e			Am	ount	
c	Вед	ginning balance						10	:			
d	A d	ditions during the year						10	i			
e	Dis	stributions during the year						16	2			
f	End	dıng balance						11	:			
2 a	Did th	ne organization include an amount oi	n Form 990, Part X,	line 21,	for es	crow	orcust	odıal acco	unt liability	′ [?]	5 N	0
b		es," explain the arrangement in Part										Ш
Ра	rt V	Endowment Funds. Comple	(a)Current year		or year			years back	 		(e)Four y	ears back
1a	Begir	nning of year balance	(-,,	(-)			_ (-/	,	(-)		(-7::: /	
b	-	ributions										
c	Net II	nvestment earnings, gains, and										
d		ts or scholarships										
e	O the and p	r expenditures for facilities programs										
f		inistrative expenses										
g		of year balance										
2		de the estimated percentage of the o	current year end bal	l lance (lın	e 1g,	colum	nn (a))	held as	1			
а	Board	d designated or quasi-endowment 🕨										
b	Perma	anent endowment ▶										
с		oorarily restricted endowment > Dercentages on lines 2a, 2b, and 2c	should equal 100%									
3a	A re th	here endowment funds not in the pos nization by	-		that ar	re hel	d and a	ıdmınıstere	ed for the		Yes	No
	(i) un	nrelated organizations						•		3 a	(i)	
b		elated organizations es" on 3a(ii), are the related organiza								-	(ii) Ib	

Part VI Land, Buildings, and Equipment.

Describe in Part XIII the intended uses of the organization's endowment funds

Total. Add lines 1a through 1e (Column (d) must equal Form 990, Part X, column (B), line 10(c))

Complete if the organization answered 'Yes' to Form	n 990, Part IV, l	line 11a.See Fo	rm 990, Part X,	line 10.
Description of property	(a) Cost or other basis (investment)	(b) Cost or other basis (other)	Accumulated (c) depreciation	(d)Book value
1a Land		801,756		801,756
b Buildings				
		30,405,335	18,856,147	11,549,188
c Leasehold improvements		949,321	949,321	0
d Equipment		5,314,086	4,857,728	456,358

47,185

12,854,487

7,438,040

7,485,225

	(Form 990) 2015					Page
Part VII	Investments—Other Securities. Con See Form 990, Part X, line 12.	nplete if the or	ganızat	on answered 'Y	es' on Fori	m 990, Part IV, line 11b
	(a) Description of security or category		(b)Book value)Method of valuation
	(including name of security)				Cost or	end-of-year market value
	al derivatives -held equity interests					
(3)Other	mere equity interests					
	nn (b) must equal Form 990, Part X, col (B) line 12)	•				
Part VIII	Investments—Program Related. Complete if the organization answered	'Yes' on Form '	990 Pa	rt IV line 11c a	·	200 Paul V. June 42
	(a) Description of investment	163 011101111) Book value	ee Form 9	990, Part X, line 13. Method of valuation
	(2, 2 3331, 311, 311, 311, 311, 311, 311,		,-	, book value		end-of-year market value
-						
	nn (b) must equal Form 990, Part X, col (B) line 13)	1104 1			1110 5	000 0 1 1 1 1 5
Part IX	Other Assets. Complete if the organization (a) Descri		on Form	990, Part IV, line	11a See F	(b) Book value
		•				
-						
-						
	mn (b) must equal Form 990, Part X, col (B) line 1					-
Part X	Other Liabilities. Complete if the organ See Form 990, Part X, line 25.	ınızatıon answe	red 'Ye	s' on Form 990	, Part IV, li	ne 11e or 11f.
1.	(a) Description of liability	(b) Book va	lue			
Federal inc	ome taxes					
Accrued Actuarial Liabilities		60,04	11,070			
		15.0	16.055.090			
Loans from related organizations		16,9	16,955,989			
Intercompany accounting		15,457,173				

92,454,232

Total. (Column (b) must equal Form 990, Part X, col (B) line 25)

1

2

е

3

5

1

2

а

b c

d

е 3

> а b

> c

Part XIII

information

Part X, Line 2

Return Reference

Schedule D (Form 990) 2015

Page 4

75,837,907

166,129,295

Net unrealized gains (losses) on investments а b 2b 949,452 Recoveries of prior year grants **2**c

c d Other (Describe in Part XIII) 2d

Total revenue, gains, and other support per audited financial statements . . .

Add lines 2a through 2d . . .

Complete if the organization answered 'Yes' on Form 990, Part IV, line 12a.

Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)

Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b,

examinations for years prior to 2012

Part V, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional

Explanation

Subtract line **2e** from line **1** Amounts included on Form 990, Part VIII, line 12, but not on line 1 Investment expenses not included on Form 990, Part VIII, line 7b . а b c

Amounts included on line 1 but not on Form 990, Part VIII, line 12

Add lines **4a** and **4b**

Total revenue Add lines 3 and 4c.(This must equal Form 990, Part I, line 12)

Total expenses and losses per audited financial statements

Amounts included on Form 990, Part IX, line 25, but not on line 1: Investment expenses not included on Form 990, Part VIII, line 7b.

Part XII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return.

Amounts included on line 1 but not on Form 990, Part IX, line 25

Supplemental Information

Add lines 2a through 2d . . .

Other (Describe in Part XIII)

4b

2b

2c 2d

ASC 740 footnote from 2015 audit Management's analysis of uncertain tax positions as required under Financial Accounting Standards Board Accounting Standards Codification Topic (ASC) 740, Income Taxes, determined that the Chamber and its affiliates had no uncertain tax positions, and as such, no liability has been recorded as of December 31, 2015 or 2014 Management does not anticipate any material changes in this position in the next 12 months. The Chamber and its affiliates are subject to routine audits by taxing jurisdictions, however, there are currently no audits for any tax

periods in progress. Management believes the Chamber is no longer subject to income tax

7,989,795

949,452

71,604,125

7,989,796

74,888,455

4c 5

2e

3

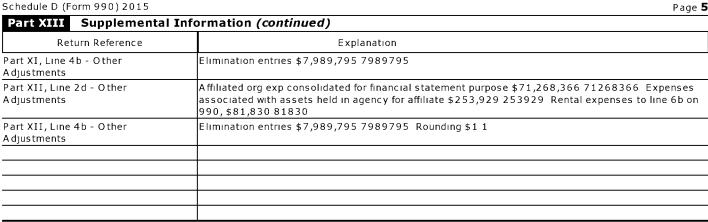
3

7,989,795 174,119,090

1 240,456,881

- 2e
 - 72,553,577 167,903,304
- 4c
 - 7,989,796 175,893,100

Schedule D (Form 990) 2015



efile GRAPHIC print - DO NOT	PROCESS	As Filed Dat	ta -		LN: 93493314013236
SCHEDULE F Stat	ement of A	Activities (Outside the Unit	ed States	OMB No 1545-0047
(, , , , , , , , , , , , , , , , , , ,	➤ Complete i	=	n answered "Yes" to Form 14b, 15, or 16.	990,	2015
		•	o Form 990.		
Department of the Treasury Internal Revenue Service ► Informati	on about Schedu	le F (Form 990) a	nd its instructions is at wi	vw.irs.gov/form990	Open to Public Inspection
Name of the organization Chamber of Commerce of the USA				Employer	identification number
				53-0045	720
Part I General Informatio Complete if the organ				14b.	
1 For grantmakers. Does the	•			-	
and other assistance, the gra	-	ty for the grar	its or assistance, and	the selection crit	eria
used to award the grants or a	assistance?				Yes No
2 For grantmakers. Describe in assistance outside the United		ganızatıon's p	rocedures for monitori	ng the use of its	grants and other
3 Activites per Region (The follow	ung Part I, line 3	table can be di	uplicated if additional spa	ce is needed)	
(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors in region	(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments, grants to recipients located in the region)	(e) If activity listed in program service, des specific type of service(s) in region	for and investments in region
(1) See Add'l Data			,		
(2)					
(3)					
(4)					
(5)					
3a Sub-total	2	41			3,728,854
b Total from continuation sheets to Part I	0	70			2,327,768
c Totals (add lines 3a and 3b) For Paperwork Reduction Act Notice, see	2	111	•	No 50082W	6,056,622 Schedule F (Form 990) 2015

Schedule F (Form 990) 2015

Page 2

1	(a) Name of	
	addıtıonal	s
	Complete	ш

orga





Enter	

)	
	Ente
	tax-e

	2)	
Ī	3)	
(4)	
2		E
		ta

(1)

•	if the organiz space is need	ation answered "Ye: led.	s" to Form 990, Par	t IV, line 15, for an	y recipient who rece	eived more than \$5,	.000. Part II can be	duplicated if
lame of nization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) A mount of cash grant	(f) Manner of cash disbursement	(g) A mount of non-cash assistance	(h) Description of non-cash assistance	(i) Method o valuation (book, FMV, appraisal, othe

total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter \ldots \ldots \blacktriangleright

Part III

(1) (2) (3) (4) (5) (6) (7) (8) (9) (10) (11) (12) (13) (14) (15) (16) (17) (18)

Schedule F (Form 990) 2015

Part III can be duplicated if additional space is needed. (a) Type of grant or (b) Region (c) Number of (d) A mount of (e) Manner of cash (f) A mount of (g) Description (h) Method of assistance recipients cash grant disbursement of non-cash valuation non-cash assistance assistance (book, FMV, appraisal, other)

V

Yes

Schedule F (Form 990) 2015

Νo

Did the organization have any operations in or related to any boycotting countries during the tax year? If "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form

5713, do not file with Form 990)

Page 5

Schedule F (Form 990) 2015

9	990 Schedule F, Suppl	emental Information	
	Return Reference	Explanation	

Part I. line 3 Schedule F Part I We use the accrual method of accounting on all of our transactions

Additional Data

(a) Doggon

East Asia and the Pacific

Europe

Software ID: Software Version:

EIN: 53-0045720

(d) A ctivition

Name: Chamber of Commerce of the USA

(a) If activity listed in

Business advocacy in

Business advocacy in

Europe

East Asia

492,170

810,829

Form 990 Schedule F Part I - Activities Outside The United States

0

(a) Region	offices in the region	employees or agents in region	conducted in region (by type) (i e , fundraising, program services, grants to recipients located in the region)	. , , ,	for region
South Asia	1		Fundraising and program services	Membership benefits	665,257

Europe

engagements

Member services in

Seminars and speaking

(a) Region (b) Number of (c) Number of (e) If activity listed in (f) Total expenditures (d) Activities offices in the employees or conducted in region (by (d) is a program for region type) (i e , fundraising, service, describe agents in region specific type of service region program services. (s) in region grants to recipients located in the region) Seminars and speaking Business advocacy in 207,482 Europe lengagements lEurope | South America Seminars and speaking Business advocacy in 184,846 lengagements South America

lengagements

Seminars and speaking

Business advocacy in

the Middle East

240,329

Form 990 Schedule F Part I - Activities Outside The United States

Middle East and North

Africa

(a) Region (b) Number of (c) Number of (e) If activity listed in (f) Total expenditures (d) Activities offices in the employees or conducted in region (by (d) is a program for region type) (i e , fundraising, service, describe agents in region specific type of service region program services. (s) in region grants to recipients located in the region) South Asia Seminars and speaking Business advocacy in 942,491 South Asia lengagements North America Seminars and speaking Business advocacy in 185,450 lengagements North America

lengagements

Seminars and speaking

Business advocacy in

Sub Saharan Africa

91,138

Form 990 Schedule F Part I - Activities Outside The United States

Sub Saharan Africa

(a) Region (b) Number of (c) Number of (e) If activity listed in (f) Total expenditures (d) Activities offices in the employees or conducted in region (by (d) is a program for region type) (i.e., fundraising, agents in service, describe region specific type of service region program services, grants to recipients (s) in region

Program services

Asıa

Europe

Policy analysis in

953,501

524,704

			located in the region)		
Central America and the Caribbean -	0	1	, ,	Business advocacy in Central America and Carribean	340,564

Caribbean -	0	1	9-9	Central America and Carribean	
East Asia and the Pacific	0	18	Program services	Policy analysis in East	

Form 990 Schedule F Part I - Activities Outside The United States

Europe

(a) Region (b) Number of (c) Number of (d) Activities (e) If activity listed in (f) Total expenditures offices in the employees or conducted in region (by (d) is a program for region type) (i e , fundraising, service, describe agents in region specific type of service region program services. grants to recipients (s) in region located in the region) 127,481

IProgram services

A merica

East

Policy analysis in Middle

100.851

121,707

North America	0	12	3	Policy analysis in North America	
South America	0	9	Program services	Policy analysis in South	

Form 990 Schedule F Part I - Activities Outside The United States

Middle East and North

Africa -

North America	O	12	3	A merica	
South America	0	9	Program services	Policy analysis in South	

(a) Region (b) Number of (c) Number of (e) If activity listed in (f) Total expenditures (d) Activities offices in the employees or conducted in region (by (d) is a program for region type) (i.e., fundraising, agents in service, describe region specific type of service region program services,

			grants to recipients located in the region)	(s) in region	
South Asia	0	3	-	Policy analysis in South	57,435
				IA sia	

IProgram services

Policy analysis in

lC arribean

Central America and

10.387

Central America and the

Caribbean -

Form 990 Schedule F Part I - Activities Outside The United States

efile GRAPHIC print - DO NOT PROCESS As Filed Data -

DLN: 93493314013236

Open to Public

Supplemental Information Regarding Fundraising or Gaming Activities Complete if the organization answered "Yes" on Form 990, Part IV, lines 17, 18, or 19, or if the

Department of the Treasury

(Form 990 or 990-EZ)

SCHEDULE G

organization entered more than \$15,000 on Form 990-EZ, line 6a Attach to Form 990 or Form 990-EZ

nter	nai Revenue Service	► Information about Sci	hedule G (Fo	rm 990 or 99	0-EZ) and its instructions is at	www irs gov/	form990	Inspection
	ne of the organization	LICA					Employer iden	tification number
. na	mber of Commerce of the	USA					53-0045720	
Pa	_	Activities. Comple ilers are not requir		_	tion answered "Yes" nis part.	on Form 9	990, Part IV,	line 17.
1	Indicate whether the or	rganization raised fund	ds through	any of th	e following activities Ch	neck all tha	t apply	
а	✓ Mail solicitations				e Solicitation of no	on-governm	ent grants	
b	✓ Internet and email	solicitations		,	f Solicitation of go	overnment g	grants	
c	▼ Phone solicitations	3			g Special fundraisi	ing events		
d		ions						
2 a					ndıvıdual (ıncludıng office ection with professional		_	es 「No
b	If "Yes," list the ten hi to be compensated at				sers) pursuant to agree	ments unde	r which the fu	ndraiser is
((i) Name and address of Individual or entity (fundraiser)	(ii) Activity	fundrais custo cont	Did ser have ody or crol of outions?	(iv) Gross receipts from activity	(or reta fundrais e	unt paid to ained by) er listed in I (i)	(vi) A mount paid to (or retained by) organization
_	Carrel Hallant	C 1	Yes	No				
1	Carol Hallett 1615 H ST NW	General fundraising		No	7,600,000		425,000	7,175,000
	Washington, DC 20062	2			, ,000,000		123,000	7,173,000
2	<u> </u>							
3			+					
4								
5								
6								
7			+					
8								
9			+					
10								
Γota	al	I	1	•	7,600,000		425,000	7,175,000
	List all states in which th registration or licensing	ne organization is regi	stered or l	ıcensed t	o solicit contributions or	r has been r	notified it is ex	xempt from

Schedule G (Form 990 or 990-EZ) 2015 Page 2 Fundraising Events. Part II Complete if the organization answered "Yes" on Form 990, Part IV, line 18, or reported more than \$15,000 of fundraising event contributions and gross income on Form 990-EZ, lines 1 and 6b. List events with gross receipts greater than \$5,000. (a)Event #1 (b)Event #2 (c)Other events (d) Total events (add col (a) through (event type) (event type) (total number) col (c)) 1 Gross receipts . 2 Less Contributions. 3 Gross income (line 1 minus line 2) 4 Cash prizes Noncash prizes 6 Rent/facility costs Expenses 7 Food and beverages 8 Entertainment Teg Teg 9 Other direct expenses 10 Direct expense summary Add lines 4 through 9 in column (d) . . . 11 Net income summary Subtract line 10 from line 3, column (d) Part III Gaming. Complete if the organization answered "Yes" on Form 990, Part IV, line 19, or reported more than \$15,000 on Form 990-EZ, line 6a. (b)Pull tabs/Instant (d) (c)O ther gaming Revenue (a)Bingo Total gaming (add col bingo/progressive bingo (a) through col (c)) 1 Gross revenue . Expenses 2 Cash prizes 3 Noncash prizes Direct 4 Rent/facility costs 5 Other direct expenses Yes______% Yes % **☐ Yes** % No 6 Volunteer labor 7 Direct expense summary Add lines 2 through 5 in column (d) 8 Net gaming income summary Subtract line 7 from line 1, column (d). Enter the state(s) in which the organization conducts gaming activities Yes No Is the organization licensed to conduct gaming activities in each of these states? If "No," explain

Were any of the organization's gaming licenses revoked, suspended or terminated during the tax year?

If "Yes," explain

Yes No

efile GRAPHIC print - DO NOT PROCESS | As Filed Data -DLN: 93493314013236 **Compensation Information** OMB No 1545-0047 Schedule J (Form 990) For certain Officers, Directors, Trustees, Key Employees, and Highest 2015 Compensated Employees ▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 23. ► Attach to Form 990. Open to Public Department of the ▶ Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990. Treasury Internal Revenue Service Name of the organization **Employer identification number** Chamber of Commerce of the USA 53-0045720 **Questions Regarding Compensation** Yes No Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items First-class or charter travel Housing allowance or residence for personal use Travel for companions Payments for business use of personal residence Tax idemnification and gross-up payments Health or social club dues or initiation fees Discretionary spending account Personal services (e.g., maid, chauffeur, chef) If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain 1b Yes Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all 2 directors, trustees, officers, including the CEO/Executive Director, regarding the items checked in line 1a? 2 Yes Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's CEO/Executive Director Check all that apply Do not check any boxes for methods used by a related organization to establish compensation of the CEO/Executive Director, but explain in Part III ✓ Compensation committee ✓ Written employment contract ✓ Independent compensation consultant Compensation survey or study Form 990 of other organizations Approval by the board or compensation committee During the year, did any person listed on Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization Receive a severance payment or change-of-control payment? 4a Yes Yes Participate in, or receive payment from, a supplemental nonqualified retirement plan? 4b Participate in, or receive payment from, an equity-based compensation arrangement? 4c Νo If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III Only 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9. For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of The organization? **5**a Any related organization? 5b If "Yes," on line 5a or 5b, describe in Part III For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of The organization? 6a Any related organization? 6b If "Yes," on line 6a or 6b, describe in Part III For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III 7 Were any amounts reported on Form 990, Part VII, paid or accured pursuant to a contract that was subject to the initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe ın Part III 8 If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53 4958-6(c)? Schedule J (Form 990) 2015 Cat No 50053T

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

					5 2 a, app	(2) a (2) a can	
(A) Name and Title	(B) Breakdown o	f W-2 and/or 1099-MI	SC compensation	(C) Retirement and	(D) Nontaxable		(F) Compensation ii
	_	(ii)	(iii)	other deferred	benefits	(B)(ı)-(D)	column(B) reported

(A) Name and Title	(B) Breakdown o	f W-2 and/or 1099-MI	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	
		(ii)	(iii)	other deferred	benefits	(B)(ı)-(D)	column(
	Base (1) compensation	Bonus & incentive	Other reportable	compensation			as defer
	I III COMPENSATION		1 .	1			_

Schedule J (Form 990) 2015

Page 2

Schedule J (Form 990) 2015

erred on prior

compensation compensation Form 990

See Additional Data Table

Part III Supplemental Information Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II Also complete this part for any additional information Return Reference Explanation Part I. Line 1a Charter air travel is provided to four of the executives listed, a portion of which is treated as taxable compensation. First class business travel is available to the President/CEO, and designated employees Eight of the executives listed in Part VII of the core form utilized first class travel at least once Travel for companions is available for business purposes only, when companions are invited and expected to attend. Five of the executives listed in Part VII of the core form utilized travel for companions at least once. None of these are treated as taxable benefits. Gross up payments are added to supplemental

Page 3

Schedule J (Form 990) 2015

Schedule J (Form 990) 2015

pension benefits. These benefits are reported as taxable benefits and are available to all employees with compensation exceeding the ERISA limit. Social club dues are available to seven of the executives listed in Part VII of the core form for business use only. They are not treated as taxable benefits Chauffeur services are available to two of the executives listed in Part VII of the core form for business use only. They are not treated as taxable benefits Part I, Lines 4a-b Severance payment David Chavern received a \$946,154 final lump sum severance payment Supplemental Pension list Robert Bruce Josten 510,224

Myron Brilliant 403,094 Shannon DiBari 376,190 Agnes Warfield 274,421 David Hirschmann 274,294 James Robinson 180,975 Stan Harrell 139,880 Lily Fu Claffee 90,351 Thomas Collamore 83,010 Robert Engstrom 77,290 Karen Harbert 72,377 Suzanne Clark 64,420 The Supplemental Pension Plan

provides cash payments to participants based on a formula that coordinates with the benefits that cannot be paid by the Retirement Plan due to the

Iqualified plan pay cap under the law These benefits are calculated and paid annually, there is no deferred component

Software ID: Software Version:

EIN: 53-0045720

Name: Chamber of Commerce of the USA

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees								
(A) Name and Title			f W-2 and/or 1099-MIS	SC compensation	(C) Retirement and	(D) Nontaxable	(E) Total of columns	
		(i) Base Compensation	(ii) Bonus & Incentive	(iii) O ther reportable	other deferred compensation	benefits	(B)(ı)-(D)	column (B) reported as deferred on prior Form 990
1Thomas J Donohue	1,,	1 051 734	compensation	compensation	+	 		
1Thomas J Donohue Pres & CEO/Director	(1)	1,051,724	5,450,000	89,402	-29,700	18,261	6,579,687	0
	(11)		0!	0	0	0	0	0
1Greg Lebedev Director/Consultant	(1)	240,000	0'	0	-10,000	0	230,000	0
Bridge, 2011	(11)	0	0	0	0	-0	. 0	0
2Lily Fu Claffee SVP, Gnl Cnsl/CLO & Secry	(1)) 597,695	675,000	90,351	27,825	20,085	1,410,956	0
SVP, GNI CNSI/CLU & Seciy	(11)	0	0	0	0			. 0
3Stan M Harrell	(1)) 497,030	240,000	139,880	34,200	23,666	934,776	0
SVP, CFO & CIO	(11)		0	0	0			. 0
4Myron Brilliant	(1)) 594,287	1 202 000	103.004	13,000	26.216	2 226 407	+
EVP, USCC, EVP & Head of Int'l			1,000,000	403,094	12,900	26,216	2,036,497	
	(11)		0!	0	0	0	, 0	0
5 Shannon D DiBari EVP, USCC, COO	(1)	597,262	450,000	376,190	-35,200	6,504	1,394,756	0
	(11)	0	0	0	0	0	0	0
6 Robert B Josten EVP, Govt Affairs	(1)	598,375	1,150,000	510,224	18,700	18,138	2,295,437	0
Evr, Governance	(11)	0	0	0	0	0		0
7 Agnes Warfield-Blanc SVP, Dev and Fund	(1)	716,502	3,000,000	274,421	27,825	25,886	4,044,634	0
SVP, Dev allu i uliu	(11)	0	0	0	0			0
8David C Chavern	(1)) 110,362	900,000	1,006,731	-11,769	2,687	2,008,011	0
EVP, USCC, President, CATI	(11)	, ol	0					. 0
9Suzanne P ClarkEVP, USCC	(1)) 589,685	100,000	73.060	9 225	31.786	1 103 650	
,				73,969	8,225	31,780	1,103,659	
	(11)		Ŭ	0	0	0	,	0
10 Thomas J Collamore SVP, Comm & Strategy, Cnsl	(1)	542,034	775,000	83,010	27,825	29,046	1,456,915	0
to Pres	(11)	0	0	0	0	- 0	0	0
11Karen A Harbert SVP, Pres & CEO, Energy Inst	(1)	471,859	650,000	72,377	27,825	23,058	1,245,119	0
SVF, FIES & OLO, LIIO, S, A.C.	(11)	0	0	0	0			0
12David T Hirschmann SVP Pres & CEO, CCMC &	(1)) 475,173	850,000	274,294	4,200	4,074	1,607,741	0
GIPC	(11)	0	0	0	0	0		0
13Robert J Engstrom Current emp, also frmr key	(1)	325,696	400,000	99,712	4,300	7,765	837,473	0
emp	(11)	,	0	0	0			
		1	1	1	ı 1	0	0	1

efile GRAPH	IC print -	DO N	IOT PROC	ESS	S As	Filed Dat	:a -				DLN:	9349	33140	13236
Schedule L			Tra	ns	actio	ns with	Intereste	d Person	IS			ОМВ	No 154!	5-0047
(Form 990 or 99	90-EZ)		"Yes" on		m 990, P or Forn	Part IV, lines n 990-EZ, Pai	ganization an 25a, 25b, 26, rt V, line 38a o 990 or Form 99	27, 28a, 28b, o or 40b.	or 28c,			2	01	.5
Department of the Treasury		►Ir	nformation a	aboı	ut Sched	•	990 or 990-EZ o <u>v /form 990</u> .) and its instr	uctions	is at			en to P nspect	
Internal Revenue Se Name of the or	<u> </u>								Fr	nnlove	er ident	ificatio	n numbe	r
Chamber of Com		SA												•
Part I Exc	ess Benef	it Tra	ansaction	1 S (:	section	501(c)(3), s	ection 501(c)	(4), and 501(3-004 organi		only)		
Com	plete if the o	rganız	ation answe		"Yes" o	n Form 990,	Part IV, line 2	25a or 25b, or	Form	990-E	Z, Part	V , line		
1 (a) Nar	ne of disqual	іпеа р	erson		(в) кев		ween disquali rganization	ified person an		•	scriptioi saction		(a) Cor Yes	rected?
									+					
									+					
4958 . 3 Enterthe	amount of ta	x, if an d/or	r From In	, ab ter	 ove, reir ested	nbursed by t	he organizatio	sons during the	•		▶ \$ ▶ \$			
		ported	l an amount (c)	on (d	Form 99 I) Loan t	0, Part X, lin	0-EZ, Part V, le 5, 6, or 22 (e)O riginal	line 38a, or F	(g)) In	(1	1)	(i)Wr	
interested person	with organizat	ion	Purpose of loan		from th anızatıo		principal amount	due	defa	ault?	A ppr by boa comm	ard or	agreei	ment?
				Т	О	From			Yes	No	Yes	No	Yes	No
	1													
Total			▶ \$			•								
	ants or As							rt IV, line 27	,					
(a) Name of	ınterested	(b)	Relationshi rested pers	ıp be	etween		t of assistance			stanc	e (e)) Purpo	se of ass	sistance
		11100	organiza											
		+												
		-												
		+												
For Paperwork Re	duction Act N	lotice,	see the Inst	ruct	ions for	Form 990 or 9	990-EZ.	Cat No 50056A		Sche	dule I (I	Form 99	0 or 990	-EZ) 201

Explanation

Return Reference

Schedule L (Form 990 or 990-EZ) 2015

Part V

Supplemental Information

Provide additional information for responses to questions on Schedule L (see instructions)

Additional Data

(3) Schedule B number 220

(4) Schedule B number 462

(5) Schedule B number 514

(6) Schedule B number 576

(7) Schedule B number 597

(8) Schedule B number 679

(9) Schedule B number 757

(10) Schedule B number 765

(11) Schedule B number 782

(12) Schedule B number 834

(13) Schedule B number 872

(14) Schedule B number 924

(15) Schedule B number 949

(16) Schedule B number 1197

(17) Schedule B number 1222

(18) Schedule B number 1469

National Black Chamber of Commerce

Software ID: Software Version:

EIN: 53-0045720

Name: Chamber of Commerce of the USA

222,838

131,027

461,068

106,000

202,500

1,177,787

228,626

200,000

762,828

560,650

597,743

538,556

398,053

284,622

See Part V Audio visual

See Part V Audit and tax

See Part V Legal policy consulting fees

relations services

183,002 | See Part V Legal services

consulting fees

consulting fees

consulting fees

consulting fees

606,573 | See Part V Legal services

111,800 | See Part V Contributions

services

services

See Part V Policy consulting

See Part V Policy consulting

and public relations services

See Part V Legal and public

See Part V Legal services

See Part V Policy consulting

See Part V Insurance brokerage

See Part V Legal policy

See Part V Legal policy

See Part V Legal policy

See Part V Public advocacy

See Part V Executive search

services

services

(e) Sharing
of
organization's
revenues?

Yes No

No No

Νo

Νo

Nο

Νo

Nο

Νo

Νo

Nο

Nο

Nο

Νo

Nο

Νo

Νo

Nο

Νo

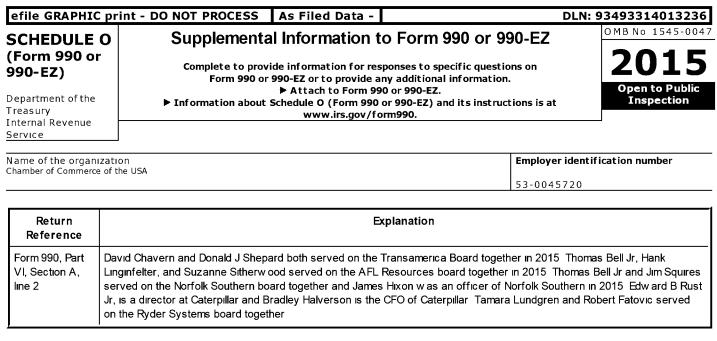
Form 990, Schedule L, Part IV - B	usiness Transactior	ns Involving Interc	ested Persons
(a) Name of Interested person	(b) Relationship between interested person and the organization	(c) A mount of transaction	(d) Description of transaction
(1) Schedule B number 48	Substantial contributor	240,000	See Part V Legal policy consulting fees
(2) Schedule B number 51	Substantial contributor	550,892	See Part V Legal policy consulting fees

Substantial contributor

(Director & CEO Natl

Harry C Alford

Black CoC)



Return Reference	Explanation
	In accordance with the Audit Committee charter, the draft Form 990 was provided in advance to the Audit Committee members, and reviewed individually with each member prior to filing. The Audit Committee performs this function pursuant to a delegation from the Board of Directors. The board receives the most recently completed tax return at the next regularly scheduled meeting.

Return Reference	Explanation
Form 990, Part VI, Section B, Iine 12c	We annually notify staff of the Standards of Conduct and Ethics policy, which includes a requirement that any transaction or relationship that is reasonably expected to give rise to an actual or apparent conflict of interest be brought to the attention of a supervisor, a senior manager in the Talent Solutions department or the Office of the General Counsel. In addition, we issue an annual written questionnaire to all members of the board of directors asking for information on potential conflicts of interest, which is gathered by the Chief Financial Officer. All reports of potential conflicts will be evaluated by the Chief Legal Officer and General Counsel, who serves as the Chamber's Ethics Officer, in consultation with other senior management and staff, as appropriate. Any conflicts of interest involving board members or staff are resolved in accordance with the Chamber's conflicts policies.

Reference	Explanation
Form 990, Part VI, Section B, line 15	Part VI Question 15a The process for determining the total compensation of the President/CEO is as follows. The President/CEO has a written employment agreement with the Chamber. Total compensation is reviewed annually by an independent compensation consultant. The consultant prepares a compensation study primarily utilizing, as available, Form 990s and surveys of comparable organizations with similar responsibilities. Based on this information, total compensation is determined by the U.S. Chamber's Employee Compensation and Benefit Arrangements Committee on an annual basis. Part VI Question 15b. The process for determining total compensation for the officers, key employees and highly compensated employees is as follows. For seven individuals, who are direct reports of the President/CEO, total compensation is reviewed annually by an independent compensation consultant. The consultant prepares a compensation study primarily utilizing, as available, Form 990s and surveys of comparable organizations with similar responsibilities. For the remaining five individuals, this consultant provides compensation information based on surveys of comparable organizations with similar positions. Based on this information, total compensation is determined by the President/CEO and the U.S. Chamber of Commerce's Employee Compensation and Benefit.

Arrangements Committee on an annual basis

Evalanation

Doturn

Reference	Explanation
Form 990, Part	The form 990 is made available to any member of the public who requests a copy. Any requestor is forwarded to the
VI, Section C,	Administrative Director of Finance of the Chamber of Commerce of the USA, who will forward a copy of the document to the
line 19	requestor The organization's governing documents, conflict of interest policy, and financial statements are not made available
	to the public Form 990, Part IV Question 12 Auditing of financial statements The U.S. Chamber of Commerce is the parent
	organization in the audited consolidated financial statements of the U.S. Chamber of Commerce. Schedule R lists additional

related organizations included in these consolidated financial statements

Doturn

Evolunation

Return Reference	Explanation
Form 990, Part XI, line 9	Minimum Pension Reserve Liability Adjustment 9989788 Minimum Post Retirement Reserve Liability Adjustment 1364363 Rounding 2

DLN: 93493314013236

53-0045720

Related Organizations and Unrelated Partnerships

▶ Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

2015

Department of the Treasury
Internal Revenue Service
Name of the organization

Chamber of Commerce of the USA

(Form 990)

► Attach to Form 990.

▶ Information about Schedule R (Form 990) and its instructions is at <u>www.irs.gov/form990</u>.

v.irs.gov/form990.

Open to Public
Inspection

Employer identification number

Part I Identification of Disregarded Entities Comple	te if the organization a	nswered "Yes" on	Form 990, Par	t IV, line 33.			
(a) Name, address, and EIN (if applicable) of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity		
(1) ChamberBiz 1615 H ST NW Washington, DC 20062 54-1960202	Small business web portal (inactive)	DC	0	0	Chamber of Commerce of the US	Δ	
Part II Identification of Related Tax-Exempt Organiz or more related tax-exempt organizations during th		e organization ans	wered "Yes" or	n Form 990, Par	t IV, line 34 because it h	ad one	5
(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	Public charity s (if section 501(Section (13) co ent	ntrolle ity?
(1)US Chamber of Commerce Foundation 1615 H St NW	Promotes understanding of public affairs issues affecting business	DE	501(c)(3)	7	Chamber of Commerce of the USA	Yes	No
Washington, DC 20062 46-1561597							
(2)National Chamber Foundation 1615 H St NW Washington, DC 20062	Promotes understanding of public affairs issues affecting business	DC	501(c)(3)	7	Chamber of Commerce of the USA	Yes	
52-6073268 (3)Center for International Private Enterprise 1155 15th St NW	Promotes democracy through private enterprise and market reform	DC	501(c)(3)	7	Chamber of Commerce of the USA	Yes	
Washington, DC 20005 52-1398742							
For Paperwork Reduction Act Notice, see the Instructions for Form 990.		Cat No 5013	5Y		Schedule R (Form	990) 2	015

Part III	Identification of Related Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990,	, Part IV,	line 34
	because it had one or more related organizations treated as a partnership during the tax year.		

(a) Name, address, and EIN of	(b)	(c)	(d)	(e)	(f) Share of	(g) Share of	(h) rtionato	(i)	Canal	rol or	(k)
related organization	Primary activity	Legal domicile	Direct controlling	Predominant income(related,		ond-of-vear	Plloca	rtionate tions?	Code V-UBI amount in box	mana	Idi Ol	Percentage ownership
related diganization		(state or		unrelated,	total income	assets	alloca	LIONS	20 of	parti	ner?	Ownership
		foreign	Citacy	excluded from		43300			Schedule K-1	Parti	iici.	
		country)		tax under					(Form 1065)			
		,,,		sections 512-					(
				514)			L			<u> </u>		
							Yes	No		Yes	No	J
		l		<u>I</u>	<u>I</u>				I			
	_											

Part IV Identification of Related Organizations Taxable as a Corporation or Trust Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.

_	_	1				04E
	No	+				
(i) Section 512 (b)(13) controlled entity?	Yes	 				
(h) Percentage ownership						
(g) Share of end- of-year assets						
(f) Share of total income						
(e) Type of entity (C corp, S corp, or trust)						
(d) Direct controlling entity						
(c) Legal domicile (state or foreign country)						
(b) Primary activity						
(a) Name, address, and EIN of related organization						1

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Part V Transactions With Related Organizations Complete if the organization ans	wered "Yes" on Form	990, Part IV, line	e 34, 35b, or 36.			
Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule				١	Yes	No
1 During the tax year, did the orgranization engage in any of the following transactions with one or more	e related organizations li	sted in Parts II-IV	>			
a Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity				La		No
b Gift, grant, or capital contribution to related organization(s)				Lb		No
c Gift, grant, or capital contribution from related organization(s)				Lc		No
d Loans or loan guarantees to or for related organization(s)				Ld		No
e Loans or loan guarantees by related organization(s)				le ۱	Yes	
${f f}$ Dividends from related organization(s)			1	Lf		No
g Sale of assets to related organization(s)			[1	Lg		No
h Purchase of assets from related organization(s)				Lh		No
i Exchange of assets with related organization(s)				1i		No
${f j}$ Lease of facilities, equipment, or other assets to related organization(s)				1j		No
 k Lease of facilities, equipment, or other assets from related organization(s) I Performance of services or membership or fundraising solicitations for related organization(s) 			· · · · · _	lk 11		No No
$m{m}$ Performance of services or membership or fundraising solicitations by related organization(s) .			· · · · -	Lm		No_
$oldsymbol{n}$ Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)			· · · · <u>[</u>		Yes	
o Sharing of paid employees with related organization(s)				Lo \	Yes	
p Reimbursement paid to related organization(s) for expenses				Lр		No
q Reimbursement paid by related organization(s) for expenses				Lq۱	Yes	
${f r}$ Other transfer of cash or property to related organization(s)				1r		No
s Other transfer of cash or property from related organization(s)				Ls		No
2 If the answer to any of the above is "Yes," see the instructions for information on who must comple	ete this line, including co	vered relationships	and transaction thresholds			
(a) Name of related organization	(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amou	int inv	olved	
(1)Center for International Private Enterprise	Q	1,217,528	Reimb for benefits costs			
(2)US Chamber of Commerce Foundation	E	235,673	Calculated interest			

Part VI Unrelated Organizations Taxable as a Partnership Complete if the organization answered "Yes" on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

revenue) that was not a related organization. See instructions													
(a) Name, address, and EIN of entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Predominant income (related, unrelated, excluded from tax under sections 512- 514)	org	(e) all partners section 501(c)(3) ganizations?	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproprtiona allocations ²		(1) Code V-UBI amount in box 20 of Schedule K-1 (Form 1065)	(J) General or managing partner?		(k) Percentage ownership
			317)	Yes	No			Yes	No		Yes	No	
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												Ш	
												\vdash	
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